| מס | lication | or | <b>Docket</b> | Numb | ı |
|----|----------|----|---------------|------|---|
|    |          |    |               |      |   |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                  |   | SMALL ENTITY TYPE ( |                     | OTHER THAN<br>OR SMALL ENTITY |      |                     |                        |  |
|--|---|---|------------------|---|---------------------|---------------------|-------------------------------|------|---------------------|------------------------|--|
| FOR  |   | NUMBE                                       | R FILED          | NUMBER EXTRA                                  |                     | RATE                | FEE                           |      | RATE                | FEE                    |  |
| BASIC FEE  |   |   |                  |   |                     |                     | 380.00                        | OR   |                     | 760.00                 |  |
| ΤO   | TAL CLAIMS  | 20  | minus 2          | s 20= *                                       |                     | X\$ 9=              |                               | OR   | X\$18=              |                        |  |
| INDEPENDENT CLAIMS 3 = *   |   |   |                  |   | X39=                |                     | OR                            | X78= |                     |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |   |                  |   |                     | +130=               |                               | OR   | +260=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |                  |   |                     | TOTAL               |                               | OR   | TOTAL               | Mala                   |  |
|  | CI  | OTHER THAN<br>SMALL ENTITY OR SMALL ENTIT   |                  |   |                     |                     |                               |      |                     |                        |  |
| AMENDMENT A  |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                  | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT<br>EXTRA    | RATE                | ADDI-<br>TIONAL<br>FEE        |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| MON  | Total   | *   | Minus            | ##  | =                   | X\$ 9=              |                               | OR   | X\$18=              |                        |  |
| ME   | Independent   | *   | Minus            | ***   | =                   | X39=                |                               | OR   | X78=                |                        |  |
|  | FIRST PRESE   | NTATION OF MU                               | JLTIPLE DEP      | ENDENT CLAIM                                  |                     | +130=               |                               | OR   | +260=               |                        |  |
|  |   |   |                  |   |                     | TOTAL<br>ADDIT, FEE |                               | OR   | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |   |   |                  |   |                     |                     |                               |      |                     |                        |  |
| ENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA    | RATE                | ADDI-<br>TIONAL<br>FEE        |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| N<br>Q   | Total   | *   | Minus            | **  | =                   | X\$ 9=              |                               | OR   | X\$18=              |                        |  |
| AMENDMENT  | Independent   | *   | Minus            | ***   | =                   | X39=                |                               | OR   | X78=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |   |                  |   |                     | +130=               |                               | OR   | +260=               |                        |  |
|  |   |   |                  |   |                     | TOTAL<br>ADDIT. FEE |                               | OR   | TOTAL<br>ADDIT. FEE |                        |  |
|  | The second states and commission appears to second in the | (Column 1)                                  |                  | (Column 2)<br>HIGHEST                         | (Column 3)          |                     |                               |      |                     |                        |  |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                  | NUMBER<br>PREVIOUSLY<br>PAID FOR              | PRESENT<br>EXTRA    | RATE-               | ADDI-<br>TIONAL<br>FEE        |      | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Ž<br>Q   | Total   | *   | Minus            | **  | =                   | X\$ 9=              |                               | OR   | X\$18=              |                        |  |
| ME   | Independent   | *   | Minus            | ***   | =                   | X39=                |                               | OR   | X78=                |                        |  |
| Ľ  | FIRST PRESE   | NTATION OF M                                | ULTIPLE DEF      | PENDENT CLAIM                                 | l                   |                     |                               |      |                     |                        |  |
|  | If the entry in colu                                      | mn 1 is lose than t                         | ne entry in colu | mn 2 write "N" in co                          | olumo 3             | +130=               |                               | OR   | +260=               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                  |   |                     |                     |                               |      |                     |                        |  |